

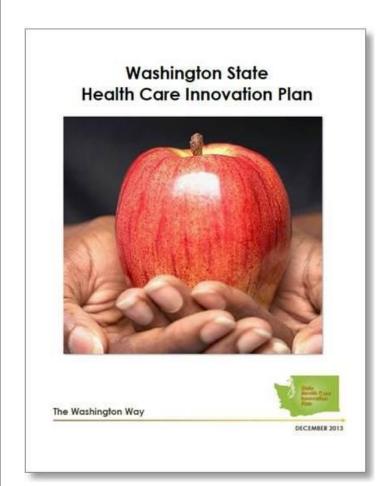
Medicaid Monthly Meeting (M3)

March 25, 2014
Karol Dixon & Mike Longnecker,
HCA Tribal Affairs Office

M3 Agenda

- Legislative Update & Health Innovation Plan
 Division of Policy, Planning & Performance
 - Laura Zaichkin, Office of Health Innovation & Reform
 Administrator & Health Innovation Plan Project Manager
 - Dennis Martin, Office of Legislative Affairs Administrator
- Tribal Affairs Staff Updates Karol & Mike
 - New monthly feature: Claims/payments At a Glance
 - Tribal Billing Workgroup (TBWG)
 - Tribal Assister Workshop: April 7, Agenda Preview
 - AI/AN and Non-Native Encounter Rate Matrix
- HCA Community-Based Staff Haley Small
- Race in P1, HPF & ACES Karol Dixon
- Enrollment Update Karol Dixon
- Tribes' Experience with Healthplanfinder Open Forum



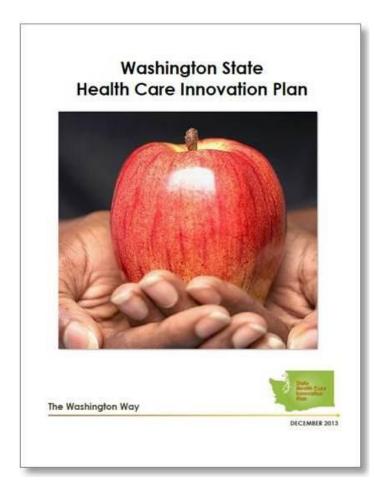


Laura Zaichkin

SCHIP Project Manager & Administrator, Office of Health Innovation and Reform

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State Health Care Innovation Plan



Goal - a Healthier Washington

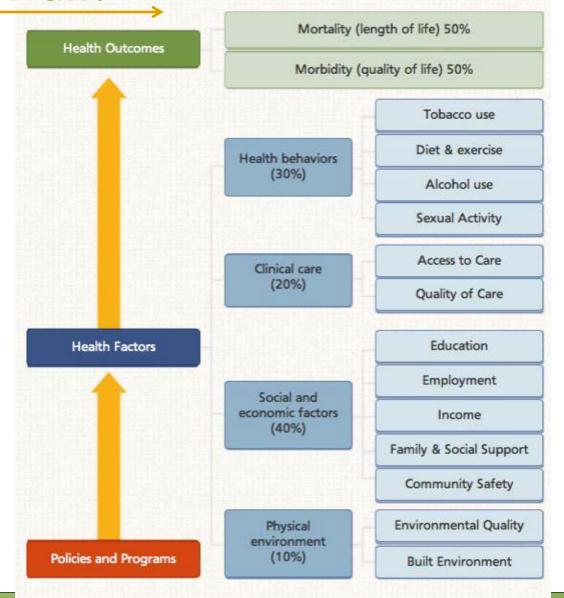
- Pay for value and outcomes instead of volume of services
- Empower communities to improve health and better link with health delivery
- Integrate physical and behavioral health to address the needs of the whole person

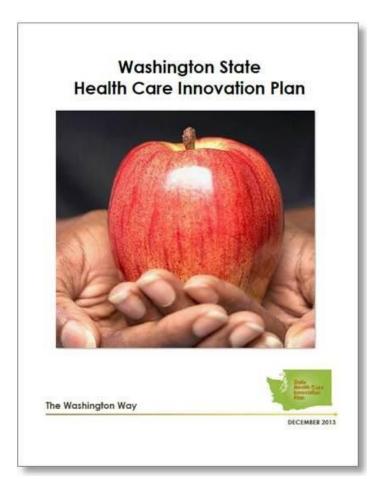
Critical - Legislation Enacted

- **E2SHB 2572** Purchasing reform, greater transparency, empowered communities
- **E2SSB 6312** Integrated whole-person care

Potential - Federal Financing

A framework to achieve a healthier Washington





- THREE Core Strategies
- SEVEN Essential Building Blocks
- The STRATEGIES & BUILDING BLOCKS WORK TOGETHER to move innovation forward

Three Strategies:

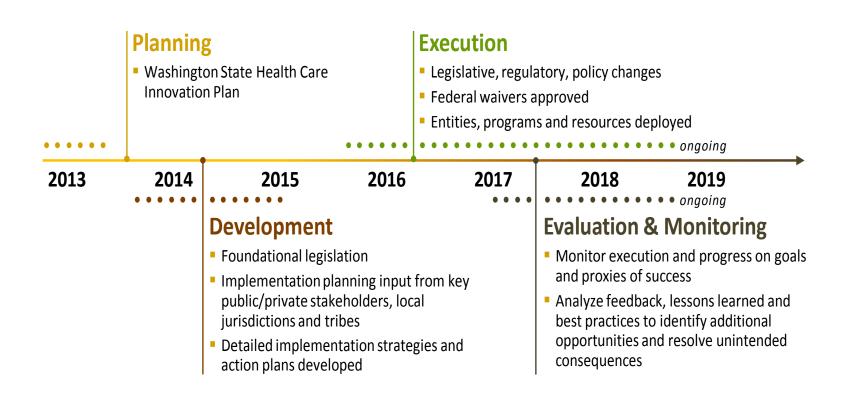
- Drive value-based purchasing across the community, starting with the State as "first mover"
- Build healthy communities and people through prevention and early mitigation of disease throughout the life course
- Improve chronic illness care through better integration of care and social supports, particularly for individuals with physical and behavioral health co-morbidities

Seven Building Blocks:

- Quality and price transparency
- Person and family engagement
- Regionalize transformation
- Accountable Communities of Health (ACHs)
- Leverage and align state data
- Practice transformation support
- Workforce capacity and flexibility

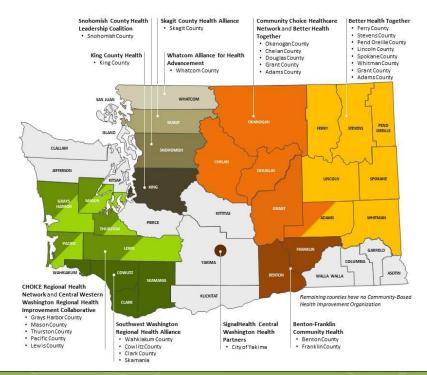
Roadmap for Health System Transformation

From planning to implementation...



Accountable Communities of Health (ACH)

- Collectively impact health through regionally driven priorities and solutions
- Medicaid purchasing alignment
- Develop a region-wide health assessment and regional health improvement plan
- Driver of accountability for results
- Forum for harmonizing payment models, performance measures and investments
- Health coordination and workforce development



Next Step: "A Series of Conversations"

ACH Development

Process informed by and informing ongoing activities, e.g., regional service area designation, performance measure activities, Prevention Framework

State

EMAC Convening

Identify foundational understanding and mutual benefit of alignment

EMAC Meeting

Alignment between State and regional priorities; identify foundations for ACH designation

EMAC Meeting

Review final designation process proposal based on discussions

External

Regional Discussions

Listening and partnership sessions with 3-4 communities

Regional Discussions

Listening and partnership sessions with communities; share designation foundations

Milestone:

ACH
Designation
Process

- 1. Letters of intent
- 2. Negotiations
- 3. Cooperative agreement

Ongoing individual meetings to engage statewide associations and key groups in process to advise development and activate regional membership

Parallel Track Development

Statewide Tribal Virtual ACH Development

- Advisory body
- · Links to regional ACHs

Legislative Update

Dennis Martin

Administrator, Office of Legislative Affairs dennis.martin@hca.wa.gov

Legislative Update

See details provided in handout, available online on or after March 28 at: http://www.hca.wa.gov/tribal/Pages/meetings centennialaccord.aspx

- ESSB 6002 Supplemental Operating Budget
- HB 2466 Dental Health Aide Therapy Services (did not pass)
- **E2SHB 2572** State Health Care Innovation Plan/Transforming Health Care Delivery
- E2SSB 6312 Mental Health & Chemical Dependency Integration
- ESSB 6228 Health Care Cost & Quality Transparency Tools & Consumer Information
- ESB 2315 Suicide Prevention Plan and Provider Training
- ESHB 2746 Medicaid Personal Care
- SSB 6387 Developmental Disabilities Services
- SSB 6124 State Alzheimer's Plan
- SB 6419 Expanding Access to Care in Medicaid Services in Border Communities
- ESSB 6511 Health Care Prior Authorization



Tribal Affairs Updates

- Claims/Payments At a Glance
- Tribal Billing Workgroup (TBWG)
- Tribal Assister Workshop—April 7, Preview Agenda
- Al/AN and NonNative Encounter Rate Matrix

Claims/Payments At a Glance

- Monthly claims analysis
- Will review all claims processed 2 months prior, regardless of date of service
- Format will evolve as mike learns how to use tools
- What are you interested seeing?

Claims/Payments At a Glance January 2014 claims Data (I/T/U)

	Billed	Paid	Denied	% pay
All Medicaid prof/dental	939,062	605,812	333,250	65%
All Tribal ITU Prof/dental	20,867	16,656	4,211	80%
Tribal Med	7,228	5,318	1,910	74%
Tribal Mental	2,370	1,898	472	80%
Tribal CD	7,444	7,214	230	97%
Tribal Dental	2,311	1,794	517	78%
Tribal other prof/dental	1,514 (778 are fqhc)	432	1082 (560 are XO)	29%
Tribal non- prof/dental	19,028 (18654 are POS)	10,697	8,327	56%

Tribal Billing Workgroup (TBWG)

- TBWG is second Tuesdays at 9:00 AM
 Next meeting: April 8
- Want to join the workgroup? Let Mike know
- Last mtg: 40 registered, 35 participating!
- 20 Tribes, Portland IHS & Hope Practice
 Management & Associates were in attendance

3/11/2014 TBWG Topics

- Medicare mental health nonpayment issue RESOLVED, claims reprocessed & paid
- Managed Care 101, managed care/PCCM cleanup and wraparound payments
- Opt out/opt in to the Public provider directory
- Remittance/invoice update
- Next month the Mental Health codeset



Tribal Assister Workshop: April 7 Agenda Preview

Monday, April 7, 2 - 4 pm @ HCA: 626 8th Avenue SE, Olympia

10: 00 AM WELCOME, INTRODUCTIONS

10:15 AM WA HEALTH CARE AUTHORITY UPDATE

Karol Dixon, HCA Tribal Affairs Administrator

Race Code

Foster Care

Medicaid Enrollment Data

10:45 AM WA HEALTH BENEFITS EXCHANGE UPDATE

Sheryl Lowe, HBE Tribal Liaison

- Tribal Verification & Tribal Income Exemption
- Outreach and Awareness Strategies
- HBE Enrollment Data

11:15 AM WORKING IN THE HEALTHPLANFINDER

- Vicki Lowe, Jamestown S'Klallam Tribe Benefits Specialist
- Natoshia Erickson, HBE Eligibility Program Specialist
- HCA Eligibility Specialist



Tribal Assister Workshop: April 7 Agenda Preview

Monday, April 7, 2 - 4 pm @ HCA: 626 8th Avenue SE, Olympia

11:15 AM (continued) Interactive Session

Separating Applications, Special Enrollments for AI/AN,

Payment Issues, Zen Desk Ticketing System, What to expect,

Medicaid Renewals, Others?

12:00 PM Lunch Break Meet & Greet with Medicaid Eligibility Staff

1:00 PM WORKING IN THE HEALTHPLANFINDER Interactive Session

2:00 PM TROUBLESHOOTING SESSION Interactive Session

Tribal Assisters bring problem applications/work through/discuss

3:00 PM PLANNING TRIBAL "GET COVERED" WORKGROUP TOPICS FOR

FUTURE Interactive Session

Identify future training resources, needs and sessions for the Exchange's weekly Tribal Get Covered (TGC) webinars



Encounter Rate Matrix

Impacts non-Native chemical dependency claims only

- Classic Medicaid clients are 50% federal dollars
- Newly eligible clients are 100% federal dollars
- Presumptive SSI clients are 75% federal dollars

How much match money should be submitted and how much should claims pay out?



Haley Small

Medical Assistance Specialist Region 5/Puyallup Tribal Clinic



- Can your organization provide a LOCATION for HCA staff who are experts in Medicaid Eligibility?
 - Part of transition of responsibilities for Medicaid from DSHS to the Health Care Authority (HCA)
 - HCA is receiving extra staffing for Medicaid Expansion
 - DSHS will only work with aged, blind, disabled populations (SSI or SSI Disability)
 - HCA is placing staff across the state to assist In-Person Assistors (IPAs) with error codes and MAGI questions
 - Most counties will have 1 HCA staff member; larger
 counties may have more
 Washington State Health Care Authority

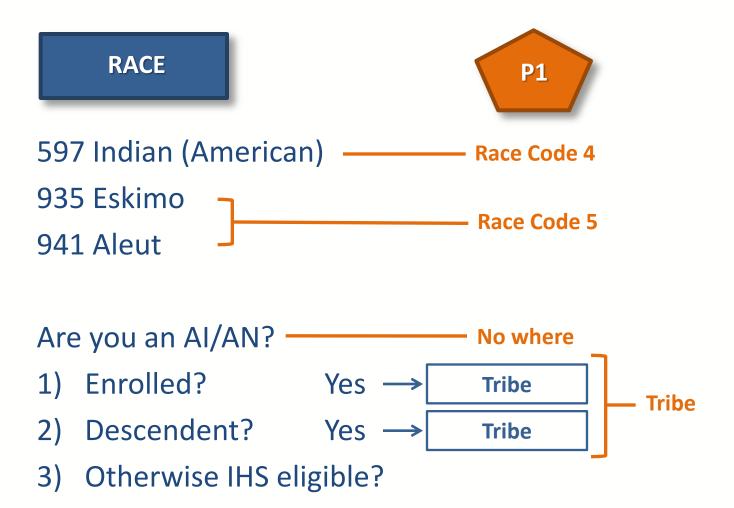
- HCA staff will have limited knowledge about the Exchange's low-cost insurance plans
 - Will <u>not</u> be able to do data entry for individual clients
 - Will be able to assist individual clients who are doing their own data entry
 - Can refer individual clients to IPAs and the Exchange Call Center

- Primary duties of HCA community-based staff members:
 - *Investigate error codes*
 - Answer questions re: application process
 - Assist recipients with renewal process
 - Answer questions re: MAGI rules
 - Check HealthPlanFinder application status for applicants
 - Look up managed care plan information for clients
 - Explain why applications are closed or denied
 - Answer questions about mail from HealthPlanFinder
 - Provide guidance on how to change managed care plans Washington State
 Health Care Authority

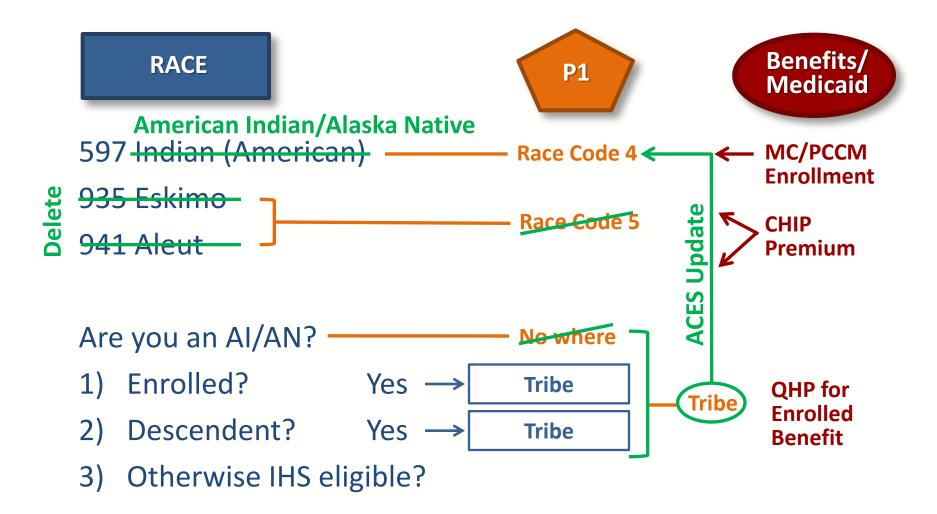
- Facility needs for HCA Staff
 - The hosting organization will need to provide:
 - Work station (cubicle or office)
 - > Furniture (if not available, HCA may be able to provide)
 - ➤ Wired internet access (staff will be assigned a computer terminal by HCA with two monitors and will use CITRIX to link to the HCA network)
 - Desk phone with voicemail
 - Occasional private meeting space to meet with his/her supervisor



Race in P1, HPF & ACES



Race in P1, HPF & ACES



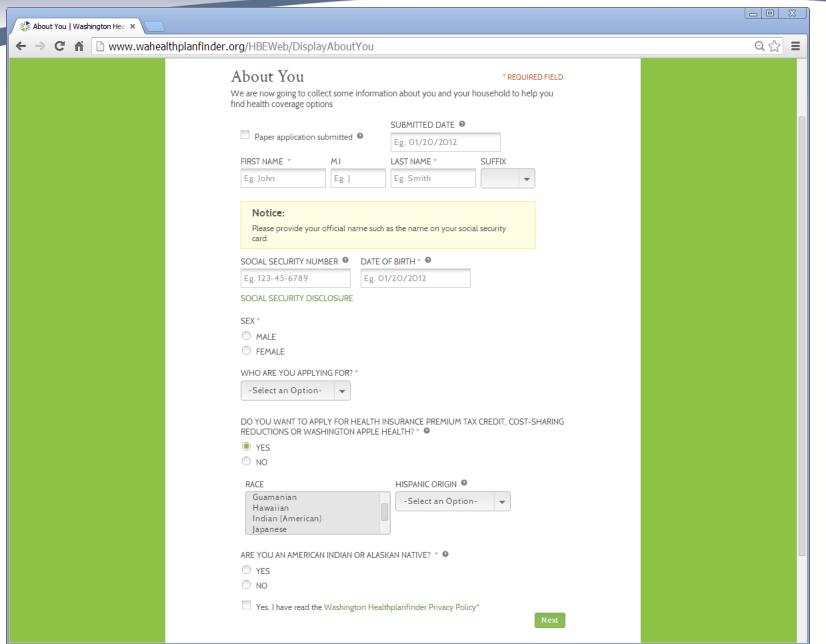
Race in P1, HPF & ACES

Race/Ethnicity Code

- 597 Indian (American)
- 599 Asian, Per SDX
- 604 Cambodian
- 608 Filipino
- 612 Korean
- 618 Thai
- 653 Hawaiian
- 660 Guamanian
- 799 Other Race
- 870 Black/African American
- 941 Aleut

- 600 Asian Indian
- 605 Chinese
- 611 Japanese
- 613 Laotian
- 619 Vietnamese
- 655 Samoan
- 699 Other API
- 800 White
- 935 Eskimo
- 999 Unreported





Race in HPF

- Are you Al or AN? (a yes answer will trigger three more questions)
 - Are you enrolled in a Tribe? (answer yes and get AI/AN cost sharing benefits in QHPs)
 - Are you a descendant?
 - Are you IHS eligible?

Race in HPF

- The Optional Race Code is coded to:
 - Race Code 4: American Indian
 - Race Code 5: Alaska Native
- Either will exempt a client from managed care
- The AI/AN question is only used for CHIP premiums;
 not MC

Potential Next Steps

- Combine AI/AN into one category
 - Both in HPF & P1
 - Functionally, we can do P1 change by coding to Race Code 4 (AI)
- Use the AI/AN question to update race in P1/Aces
- Use either race or AI/AN question for MC
- Clean up





Washington Apple Health (Medicaid) Enrollment Update

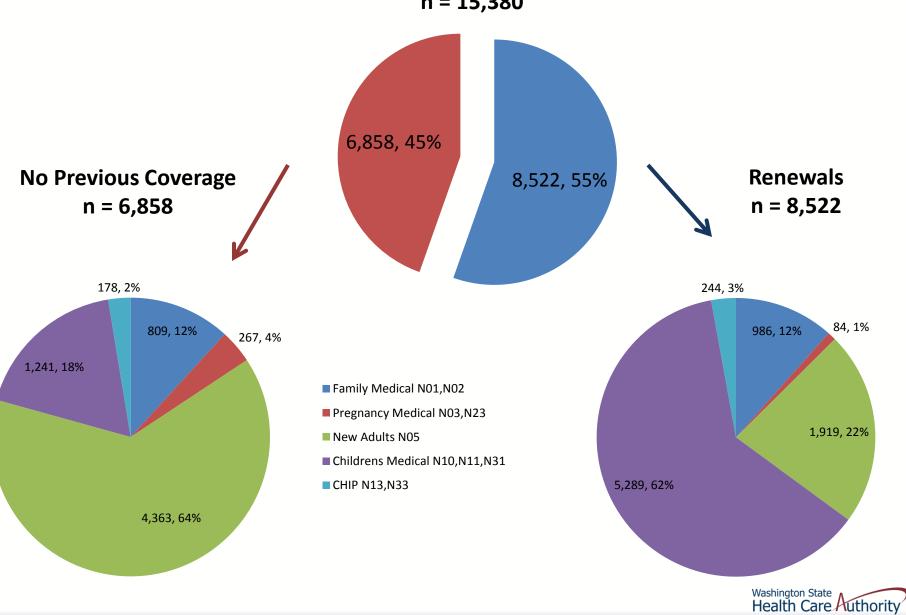
All data 10/01/2013 – 02/28/2014 Karol Dixon, Health Care Authority March 27, 2014

The following slides are on both

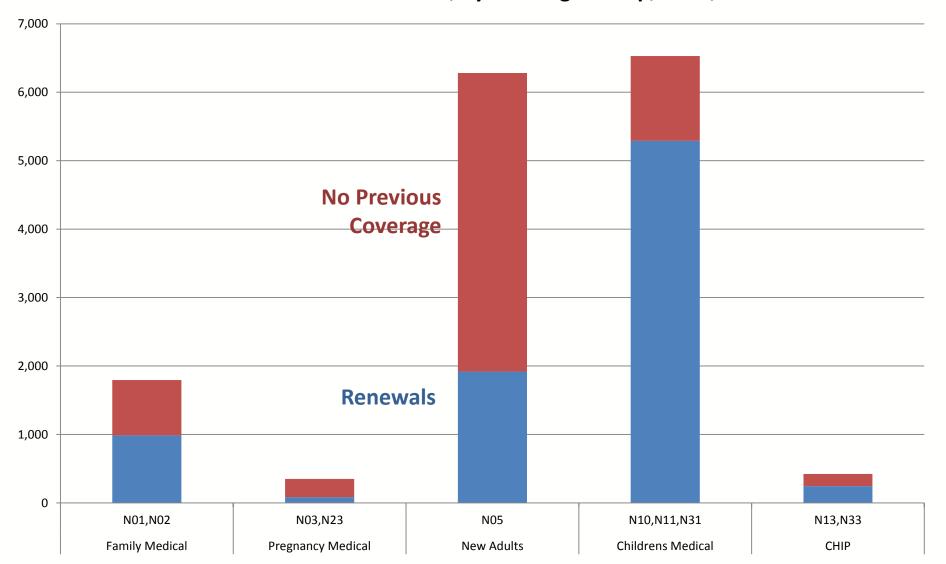
NO PREVIOUS COVERAGE (N=6858) & RENEWALS (N=8522)







AI/AN No Previous Coverage & Renewals, Oct-Feb, by Coverage Group, n=15,380

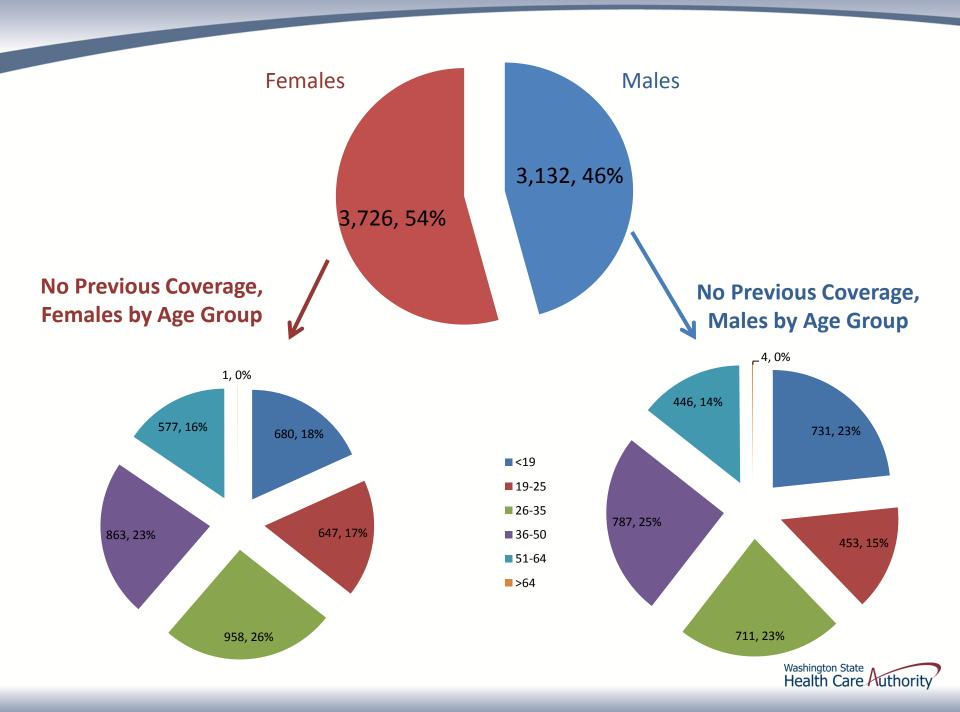




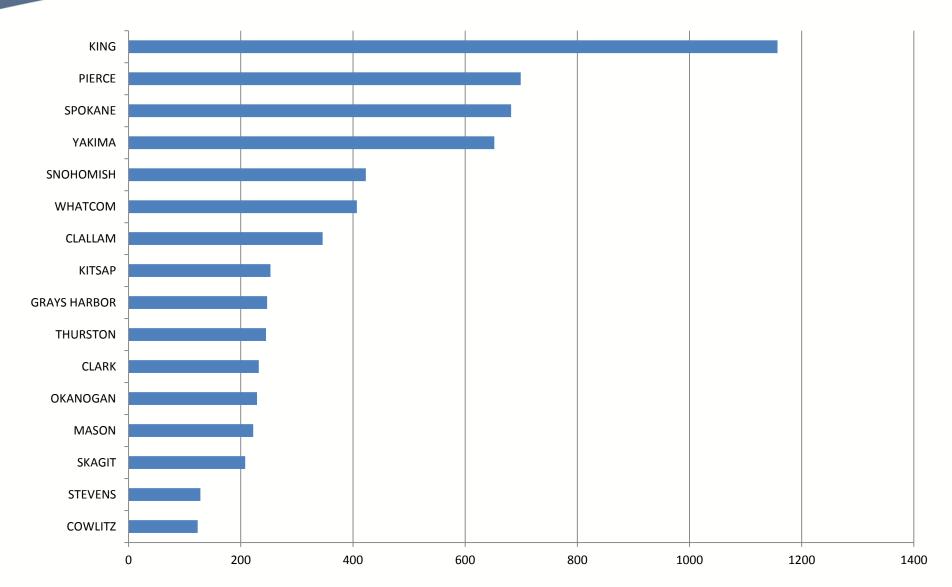
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NO PREVIOUS COVERAGE ONLY N=6858



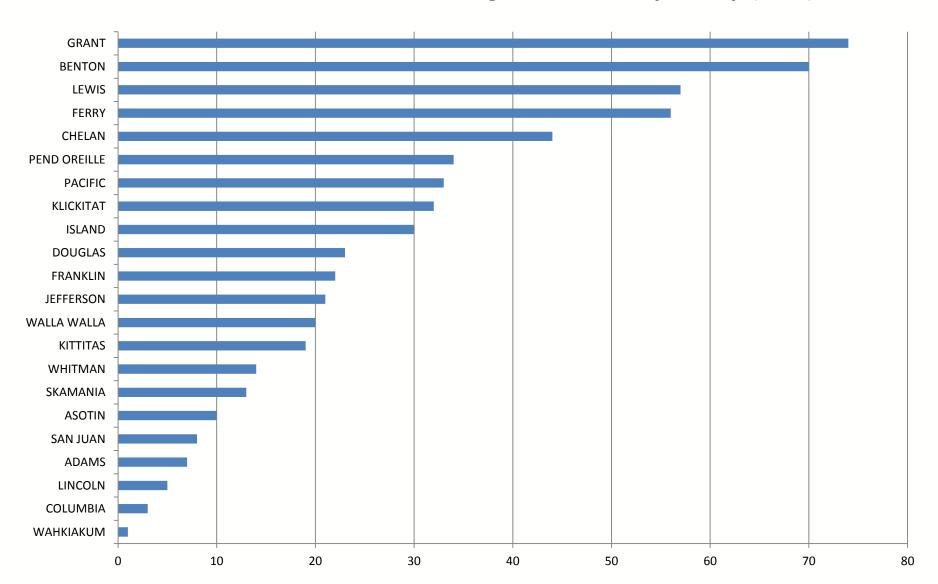


AI/AN No Previous Coverage Enrollments by County (>100)



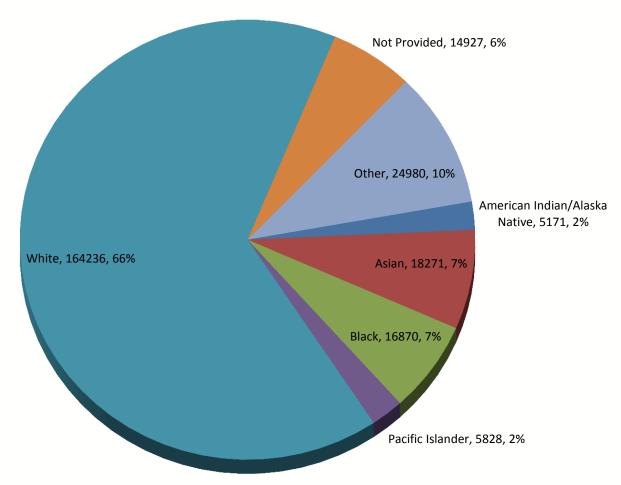


AI/AN No Previous Coverage Enrollments by County (<100)





Newly Eligible Adults by Race/Ethnicity



Apple Health enrollments as of March 20, 2104.



Tribes' Experience with Healthplanfinder



2014 HCA Tribal Affairs Meeting Schedule

Tribal Billing Workgroup (TBWG)

2nd Tuesday, 9:00-11:00 AM unless noted*

April 8

May 13

June 10

July 8

August 12

September 9

October 14

November 12 * (Wednesday)

December 9

Medicaid Monthly Meeting (M3)

4th Tuesday, 1:00-3:00 PM unless noted*

April 29 *(5th Tuesday)

May 27

June 16 *(Mon, 10 AM-12 PM)

July 22

August 26

September 23

October 28

November 18 * (Wednesday)

December 16 * (3rd Tuesday)

As of 01/30/2014. Register or download files online! http://www.hca.wa.gov/tribal/Pages/index.aspx



Thank you!

For comments or questions, contact:

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